

2007 CHW COMMUNITY GRANTS ANNOUNCEMENT FOR ST. JOSEPH'S HOSPITAL AND MEDICAL CENTER

Catholic Healthcare West (CHW) is pleased to announce the official kick-off of the 2007 CHW Community Grants Program for St. Joseph's Hospital and Medical Center on **July 30, 2007.**

Information Included in This Release

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Community Grants Overview

CHW's Community Grants Program is designed to help communities to provide support for underserved populations. With this program CHW realizes its mission and enhances the advocacy, social justice and healthier communities' efforts of its hospitals and religious and community sponsors. CHW seeks to partner with other nonprofit organizations that are working to improve the health status and quality of life of the communities we serve and whose efforts embody CHW's [Core Values](#).

CHW's Community Grants Program is funded by contributions from its member hospitals. Typically, grant awards range from \$5,000 to \$25,000 and projects funded must involve collaboration with others. Since 1990 when this program began, CHW has made grant awards to 1365 projects totaling \$22 million.

Priorities

The objective of CHW's Community Grants Program is to award grants to nonprofit organizations whose proposals respond to the St. Joseph's Hospital's strategic priorities identified in the health assessment and/or the community benefit plan. CHW grant funds are to be used to provide services to underserved populations.

Criteria

- Funding up to \$25,000. Due to availability of funds hospitals may reduce this limit.
- Strict adherence to grant guidelines.
- Proposals must identify the type of change expected and how and over what time period progress will be measured.

Eligibility

- Applicant must be a 501(c)(3) nonprofit organization or have a fiscal agent that is a 501(c)(3) organization and capable of administering the project's funds.
- The project/program must be a response to the health priorities identified in the local hospital's Community Health assessment or Community Benefit Plan.
- The project to be funded must involve collaboration with other organizations and/or with a CHW hospital.

Timeline

- Intent to Apply Due by 5 p.m.: August 24, 2007
- Encourage/Discourage Notification Sent by 5 p.m.: September 10, 2007
- Final Grant Application Due by 5 p.m.: October 5, 2007
- Final Grant Approval by CHW Investment Committee: December 5, 2007

2007 St. Joseph's Hospital and Medical Center Initiative and Background Information

Recognizing the importance of treating the whole person within a continuum of care beginning with prevention, this year's 2007 CHW Community Grants initiative will build on St. Joseph's Hospital and Medical Center's plan and the Department of Health Services' *"Injury Surveillance and Prevention Plan for the State of Arizona 2006-2010"*. A copy of the plan can be found on (http://azdhs.gov/phs/owch/pdf/injury_plan_06-10.pdf) expanding the focus to include addressing behavioral and/or mental health issues within a holistic framework.

While people tend to perceive injuries happening because of unpreventable accidents, most injuries are predictable, preventable and understandable. Injury prevention focuses on all types of injuries whether unintentional or intentional, occurring in different settings, and with different causes. Injury types include fractures, lacerations, penetrating injuries, burns, head injuries, poisonings, strains, falls, substance abuse injuries, abuse, and drowning.

The Facts:

- In 2004, injuries were the leading cause of death to Arizonans from age one to forty-four.¹
- In 2004, about 1 out of 14 Arizona residents sought medical attention for an injury! There were 4,108 deaths, 37,581 inpatient hospitalizations (including 659 death), and 380,112 emergency department visits (including 281 deaths) due to injuries among Arizona residents in 2004.²
- Unintentional falls are the leading cause of non-fatal injury for children ages 0 – 14, the third leading cause for 15-24 year olds, and returns to the leading cause of non-fatal injury for adults over age 25.³
- One in five injury-related deaths (21 percent, n=854) were suicides and 12 percent (n=486) were homicides.³
- Firearms accounted for 59 percent of suicides and 68 percent of homicides.
- Unintentional drowning rate for Arizona children 0-4 (5.5 deaths per 100,000 children, 2000-2004) is twice the national rate (2.7 per 100,000 children, 2000-2003), the third highest state rate in the United States.⁴

Individuals with behavioral and/or mental health issues are at greater risk of injury as are members of communities with disproportionate unmet health care needs. Behavioral and mental health co-morbidities result in increased emergency department utilization. Examples include, but are not limited to, alcohol and drug abuse, post-traumatic stress syndrome, effects of traumatic brain injury and other various forms of cognitive impairment, ADD/ADHD, self-harm, family and/or relationship violence depression, etc. These factors impact not only the risk of injury, but also the ability to manage chronic disease, which may not only lead to increased risk of injury but also magnified behavioral/mental health issues.

¹ Arizona Health Status and Vital Statistics 2004.

² Arizona Health Status and Vital Statistics 2004.

³ Home Safety Council, *The State of Home Safety in America: Facts about Unintentional Injuries in the Home*, Second Edition, 2004.

⁴ Centers for Disease Control and Prevention, National Centers for Injury Prevention and Control. Web-based Injury Statistics Query and Reporting System (WISQARS) [online]. (2005) {cited 2006 Feb 2}. Available from: www.cdc.gov/ncipc/wisqars.

Successful applications should implement:

- Health protection and/or prevention programs for targeted communities with high prevalence of injuries and behavioral/mental health issues. Please identify specific communities, individuals, and demographics in your proposed targeted work.
- The program should use an “integrated health model of injury prevention”, which would include addressing one or more behavioral and/or mental health issues, barriers to wellness, health protection, collaboration, and addressing a continuum of care that links clients to the assets and services in the community.
- The program should be “result-based” and intend to provide clear strategies, measurable goals and objectives on health improvement and prevention.

Examples

The following are examples of potential programs:

- *An example of how this might work would be a program working with at-risk youth where referrals could be made from our St. Joseph’s Hospital and Medical Center’s injury prevention programs and/or any of our clinics for youth identified with alcohol dependence/substance abuse problems.*
- *Another possibility would be developing an educational curriculum for parents of children with special health needs, learning disabilities, such as ADD/ADHD and/or traumatic brain injury. The education would address specific injury prevention and disease management issues these parents must deal with.*
- *A program/project might be a clinic treating those with chronic disease who would address a specific area mentioned in the Arizona Department Health Services Injury Prevention Plan – such as falls in the youth, elderly and/or suicide. The program would identify how they would screen patients and provide a continuum of care that would address the participant’s needs. They would also identify the risk factors and provide special guidance and referrals to a collaborative program to address the underlying risk factors.*

All prospective applicants are asked to submit a Letter of Intent. The LOI must use the format on www.chwhealth.org (go to Community Health/Community Grants/Letter of Intent) all other formats will not qualify for consideration. Letters of Intent are to be submitted by e-mail to CommunityGrantsSJHMC@chw.edu and one copy to be mailed to: **Marisue Garganta, Director of Health Integration, St. Joseph’s Hospital and Medical Center, Great American Tower – Suite 1000, 10th Floor, 3200 North Central Avenue, Phoenix, AZ 85012.**

After Letter of Intent are reviewed a full proposal will be REQUESTED from applicants whose projects BEST address CHW’s Community Grants Program priorities and initiative. Those applicants who qualify will be sent an outline when invited to prepare a full proposal.

The deadline for Letters of Intent is 5:00 PM on Friday, August 24, 2007.

**CATHOLIC HEALTHCARE WEST
2007 COMMUNITY GRANTS PROGRAM**

SUBMITTING LETTER OF INTENT

**THE LETTER OF INTENT SHOULD NOT EXCEED 3 PAGES (Please use 10-point font)
DO NOT FAX LETTER OF INTENT OR SEND VIDEOS OR ANY EXTRA MATERIALS.**

**FORWARD 1 ELECTRONIC COPY OF THE LETTER OF INTENT NO LATER THAN 5PM on
8/24/2007**

**MAIL 1 (one) PRINTED COPIES OF THE COMPLETE LETTER OF INTENT TO YOUR LOCAL
REPRESENTATIVE NO LATER THAN 5 PM on 8/24/2007 To:**

**St. Joseph's Hospital and Medical Center
Marisue Garganta, Director of Community Health Integration
3200 North Central Avenue, Suite, 1000
(voice) 602.406.6580 (FAX) 602.798-0529
Email to: CommunityGrantsSJHMC@chw.edu**

FOR CHW LOCAL GRANT REPRESENTATIVE GO TO www.chwHEALTH.org/communitygrants

I. Applicant Information

Name of Organization _____ Tax ID # _____ Web Address _____

Address _____ City _____ State _____ Zip _____

Contact Person _____ Phone _____ Fax _____

Title _____ E-mail address _____

OUTLINE FOR LETTER OF INTENT

Briefly summarize the *mission of your organization*.

Briefly describe the *purpose of your request*.
Indicate how your project incorporates **one or more of these principles**:

1. Focus on disproportionate unmet health related needs; *[Seek to accommodate the most disproportionate unmet health-related needs of specific populations in the community]*
2. Emphasize primary prevention/address underlying causes of health problems; *[Seek through programs and services ways to address the underlying causes of persistent health problems]*
3. Contribute to seamless continuum of care; *[Seek to enhance links between hospital services, clinic services, other health-related services, and community-based services]*

4. Build community capacity; <i>[Seek to target resources to mobilize and build the capacity of existing community assets]</i>	
5. Emphasize collaborative governance. <i>[Seek to engage diverse community stakeholders in the selection, design, implementation, and evaluation of community programs]</i>	
Explain how this project or program is a response to a health priority identified in your hospital's invitation to submit a letter of intent. PRIORITY: (Recognizing the importance of treating the whole person within a continuum of care beginning with prevention, the initiative will build on St. Joseph's Hospital and Medical Center's plan and the Department of Health Services' " <i>Injury Surveillance and Prevention Plan for the State of Arizona 2006-2010</i> ". A copy of the plan can be found on (http://azdhs.gov/phs/owch/pdf/injury_plan_06-10.pdf) expanding the focus to include addressing behavioral and/or mental health issues within a holistic framework.)	
Describe how this project is a collaborative effort . Include name(s) of the organization(s) with whom you are working and the nature of your collaboration.	
What are the main outcomes for which you are requesting support?	
What are the most important activities that will help you achieve those outcomes? Include frequency/duration of program events or services provided.	
How will you evaluate your work?	
Identify other sources of support for this project or program.	
How much are you requesting from CHW ? [Ordinarily funding up to \$25,000]	

If your organization received a CHW Grant in 2004, 2005 and/or 2006, complete the following for each year:

Year of CHW Grant and Grant Amount	
Briefly describe the program or project	